

**Review  
of the  
  
State of Missouri  
Needs Assessment & Resource Inventory for Mental Health**

**Background:**

In October, 2006, the State of Missouri was awarded a Mental Health Transformation State Improvement Grant (MH-TSIG) from the Center for Mental Health Services (CMHS) in the Substance Abuse and Mental Health Services Administration within the United States Department of Health and Human Services. Based upon the recommendations of the President's New Freedom Commission Report issued in 2003 and its call for a fundamental transformation of the nation's approach to mental health care, the purpose of the federal grant is to assist the state in transforming its public mental health system to one primarily driven not by bureaucratic and financial requirements, but by consumer/family needs and aimed towards both building resiliency and facilitating recovery.

Along with eight other states awarded this highly competitive five (5) year cooperative agreement in 2005 and 2006, a major "deliverable" of the grant was a "Needs Assessment and Resource Inventory Report". The Report is intended to outline the strengths, needs, and resources existing in the state's mental health system and to provide the foundation for development of a "Comprehensive Mental Health Plan" to guide the state's multi-year transformation process. As required by the cooperative agreement, this Report, entitled the *State of Missouri Needs Assessment & Resource Inventory for Mental Health*, was submitted to CMHS in April, 2008 and meets the requirements of the cooperative agreement.

**Process Utilized for Report Preparation:**

Although the purpose of the MH-TSIG is to assist the states in their transformation of the mental health system, doing so is only possible by the active participation and cooperation of all state and other agencies whose policies and/or practices impact upon a consumer's recovery. Consequently, the grant requires the State Mental Health Authority – in this case the Missouri Department of Mental Health – to work collaboratively with other agencies/systems and to directly involve consumers and their families as partners in planning and implementation activities. Thus, in reviewing the content and adequacy of the Report, it is important to understand the process utilized by the state in developing its findings.

In this instance, the process utilized was both expansive and inclusive. Through a contract with the Missouri Institute of Mental Health (MIMH), dozens of existing reports and data sources were reviewed; 15 focus groups held with 191 consumers; online surveys conducted with 184 mental health, substance abuse, and mental retardation/developmental disabilities agencies; and online surveys completed by 14 Transformation Working Group (TWG) members and 108 participants on the multiple workgroups established by the TWG. In addition, 14 public hearings were held across Missouri with input/comments received from 421 individuals and organizations.

The result was a *Needs Assessment & Resource Inventory for Mental Health* (NARI) of 196 pages arranged in 8 chapters. It provides an estimate of prevalence rates for mental illness, substance abuse, and mental retardation/developmental disabilities across the life span, descriptive profiles of consumers, and financial resources currently aimed to meet service needs. Additionally, it delineates needs as perceived by differing stakeholder groups and identifies 21 themes clustered into six (6) domains: Safety; Access to Care; Mental Health Wellness; Consumer-driven Care and Support; Quality Mental Health Care; and Mental Health System Fragmentation.

In addition to the Report's specific content, however, it is also clear that the process utilized in its development was itself an important outcome. It not only highly valued the participation of consumers, their families, and all other stakeholders but it reinforced and strengthened the strong cross-agency, collaborative partnership essential to meeting the goals of the transformation process.

## **Overall Review Findings:**

Overall, the *Needs Assessment & Resource Inventory for Mental Health* is a well organized and well written document that provides an excellent view of the many strengths and multiple challenges of Missouri's mental health, substance abuse, and mental retardation/developmental disabilities systems. It generally reflects information gathered at a statewide level during the first year of the MHT-SIG and is expected to be later updated to expand its scope to include regional, local, and private providers of mental health care services. As such, it has the potential of serving not only as a foundation for immediate Transformation efforts, but as an ongoing framework for future planning and decision making.

Although the T-SIG cooperative agreement focuses on transformation of the mental health system, the State of Missouri has chosen to expand its focus so as to include both its substance abuse and mental retardation/developmental disabilities systems as well. As a result, the *Needs Assessment & Resource Inventory for Mental Health* fully integrates substance abuse and mental retardation/developmental disabilities services, resources, and needs within its presentation and overall transformation goals. While this action will increase the already daunting challenges associated with transformation, it will also undoubtedly well serve Missourians with a substance abuse disorder or mental retardation/developmental disability -- especially those with co-occurring mental illnesses.

A major strength of the NARI is the identification of six domains and 21 cross-cutting themes that emerged from the needs assessment process. Each theme is well described within the Report and each is shown in relation to its relative importance across stakeholder groups. Although every theme is cited by multiple stakeholder groups as representing immediate needs in Missouri, the presentation provides an effective way to visualize needs deemed most important by each of the separate stakeholder groups and for each group to better understand the extent of its agreement with the priority needs cited by other stakeholders.

As noted above, the process utilized for the needs assessment was expansive and included multiple focus groups and interviews, as well as public hearings, online surveys, and information reviews. Within the NARI, the results of the focus group and interview findings are separately reported for each of ten population groups or sub-groups. For each, a summary of findings and recommendations is presented, as is an overview of the population itself in Missouri, the prevalence of mental health difficulties among them, and key themes identified from their perspective. This approach is a strength of the NARI in that it not only served to effectively identify the differing needs and perceptions of these important population groups and sub-groups, but also provides valuable information for state, regional, and local transformational activities and strategic planning.

The NARI also provides an overview of the programs and resources currently provided by multiple state departments for addressing mental health, substance abuse, and mental retardation/developmental disability treatment needs. Included are the Divisions of Comprehensive Psychiatric Services, Alcohol and Drug Abuse, and Mental Retardation/Developmental Disabilities in the Department of Mental Health; the Department of Elementary and Secondary Education; the Department of Social Services; the Department of Health and Senior Services; the Department of Corrections; and a number of cross-departmental initiatives, as well as a summary of consumer-operated service programs. Also described in some detail are the substantial financial expenditures currently being made by the State of Missouri across all of its departments on mental health services.

At the same time, in a straight-forward and honest presentation, the NARI clearly outlines substantial challenges facing the State. Utilizing prevalence data compared with service usage, it is estimated that the Department of Mental Health currently meets only 12% of treatment needs of its citizens with mental illness and serves only 5% of individuals with alcohol or drug use difficulties and 34% of persons with mental retardation/developmental disabilities. Although it is expected that additional prevalence information and service data will be reviewed across other state departments in the months ahead, it is expected – as in many other states – that the overwhelming majority of low income residents with mental illness, substance abuse, and/or mental retardation/developmental disabilities remain unserved.

In this regard, utilizing surveys, interviews, and other techniques, the NARI presents a comprehensive summary of needs as perceived by state agencies and multiple stakeholder groups. It also provides estimated prevalence data on a statewide basis together with numbers of consumers served and related expenditures primarily by the Department of Mental Health and Missouri HealthNet. As planned updates are completed and information added from other state departments in the months ahead, it may be useful for prevalence data, expenditures, and perceived need to also be evaluated in regard to the types of services provided and on a county and/or regional basis. Doing so might allow for a more detailed comparison of need vs. deployed resources and better inform future planning to identify and address unmet need in differing areas of this highly geographically diverse state.

Overall, the *Needs Assessment & Resource Inventory for Mental Health* provides a comprehensive and clearly written document for those involved in or affected by mental illness, substance abuse, and/or mental retardation/developmental disabilities in the State of Missouri. As acknowledged within the document, the State's needs in regard to mental health, substance abuse, and mental retardation/developmental disabilities services are formidable and widespread. But, it is also clear that Missouri has significant resources committed to the process and already provides many innovative and effective programs across all three service systems. Additionally, it is evident that both a working partnership with all stakeholders and an operational infrastructure is being developed to expand the range and scope of services so as to support the Transformation goals it values. The state is also fortunate to have skilled and talented leadership directing transformation activities and a strong commitment to a consumer-driven, recovery-focused, trauma-informed, and culturally competent service system.